

It is expected that a quorum of the Board of Public Works, Common Council, Plan Commission and Personnel Committee will be attending this meeting, although it is not expected that any official action of any of these bodies will be taken.

CITY OF MENASHA
Administration Committee
City Hall-140 Main St.-Council Chambers-3rd Floor
September 2, 2008

6:45 PM

AGENDA

 [Back](#)  [Print](#)

1. CALL TO ORDER

A. Call to Order

2. ROLL CALL/EXCUSED ABSENCES

A. Roll Call

3. MINUTES TO APPROVE-MINUTES & COMMUNICATIONS TO RECEIVE

Minutes to approve:

A. Administration Committee Minutes, 8/18/08

☐

[Attachments](#)

4. DISCUSSION

A. License: "Class A" Application for Wisconsin CVS Pharmacy, L.L.C, Amy Lynn Vandenhogen-Braun, Agent for the premise at 1485 Oneida St. for the 2008-2009 licensing year.

☐

[Attachments](#)

B. Acceptance of Life Scan Grant from Dept. of Justice and authorization to purchase Live Scan System.

☐

[Attachments](#)

C. Accounts payable and payroll for 8/21/08- 8/28/08 in the amount of \$1,071,603.62

☐

[Attachments](#)

5. ADJOURNMENT

A. Adjournment

"Menasha is committed to its diverse population. Our Non-English speaking population or those with disabilities are invited to contact the Menasha city Clerk at 967-3600 at least 24 hours in advance of the meeting so special accommodations can be made."

CITY OF MENASHA
Administration Committee
140 Main Street, 3rd Floor Council Chambers
August 18, 2008

MINUTES

 [← Back](#)  [Print](#)

1. CALL TO ORDER

Meeting called to order by Chairman Wisneski at 6:20 p.m.

2. ROLL CALL/EXCUSED ABSENCES

A. [Roll Call](#)

PRESENT: Ald. Pack, Hendricks, Zelinski, Michalkiewicz, Benner, Pamentor, Taylor Wisneski.

ALSO PRESENT: Mayor Merkes, Neenah City Attorney Jim Godlewski, PC Stanke, CDD Keil, C/T Stoffel, PRD Tungate, AP Beckendorf, Eng. Suprv. Montour, Clerk Galeazzi, and the Press.

3. MINUTES TO APPROVE-MINUTES & COMMUNICATIONS TO RECEIVE

Minutes to approve:

A. [Administration Committee Minutes, 8/4/08](#)

Moved by Alderman Pack, seconded by Alderman Taylor to approve minutes

Motion Carried on voice vote

Results:

4. DISCUSSION

A. [Recommend acquiescence with Athletica LLC Offer to Purchase](#)

Attorney Godlewski explained the buyers and sellers of the property are asking the City not to file an objection to the Offer to Purchase. The buyers and sellers have both accepted the Offer to Purchase and are now waiting for approval from the courts. The Offer to Purchase will eliminate any discounts provided previously to Lake Park Villas property owners who purchased and built homes in the subdivision where the Athletica Fitness Center is located.

B. [Gilbert Site Planning Grant Award funding shortfall](#)

CDD Keil explained the planning grant funds from the Dept. of Commerce was \$5,000 less than originally requested. Since the grant is matching funds, the developer has agreed to split the difference of the shortfall and increase their portion to \$7,500. Vierbicher and Associates are prepared to begin work on the plan immediately. There is still some paperwork that needs to be completed by the Dept. of Commerce.

C. [Jazzfest Fee Reduction for 2008 \(Recommendation of Parks and Recreation Board\)](#)

PRD Tungate explained the sponsors of Jazzfest, Jazz Corner Society, qualify for a waiver of certain fees. They are requesting a reduction of \$45.00 of various park fees.

D. Request to approve Sungard HTE Software Agreement (Recommendation of IT Steering Committee)

C/T Stoffel explained the HTE Financial Software was used by the City from 2000 to 2004 and it worked well for the City. HTE made the decision to discontinue offering the software designed for small cities. The City was offered to go with a different software more designed for large cities. The objection was rejected because of budget constraints. The City switched to Solomon Software, which was not a good fit, but was within the budget. Recently HTE has come out with a program that would fit the City's needs and is more affordable.

When asked where the funds for startup would come from, C/T Stoffel explained the City recently receive a refund from the fire department that could be used.

Discussion ensued if this is the right time to implement this program.

E. R-16-08 A Resolution Transferring Funds (Ald. Wisneski)

No Questions or Discussion

F. Accounts payable and payroll for 8/7/08-8/14/08 in the amount of \$2,888,084.89

Ck. #17949-All-Sport Trophy-\$55.95-Rising Star Award for the Victim Crisis Response program.

Ck. #17962-Bruce Municipal Equipment-\$1,010.60-linear actuator for Parks Dept.

Ck. #18108-Sport-O-Motive-\$71.79-new additional part for Police Ranger.

Ck. #17950-Appanasha Pet Clinic-\$237-15-rabies exam/euthanasia stray cat.

Ck. #18069-Grainger Inc.-\$870.-replace pump at Milwaukee St fountain

Ck. #17971-Fischer-Ulman Construction-\$1,520.-CDBG Rehab Program.

Ck. #17972-Fox Excavating-\$1,181.25-demolition of 535 1st St.

Ck. #17974-Germania Hall-\$829.64-Victim Crisis Response Dinner

Ck. #18052-Badger Lab-\$280.-sampling/testing of water for Utilities.

Ck. #18095-NM Sewerage Comm-\$10,409.50-legal representation for Fox River cleanup.

5. ADJOURNMENT

A. Adjournment

Moved by Alderman Pack, seconded by Alderman Hendricks to adjourn at 7:08 p.m.

Motion Carried on voice vote

Results:

Deborah A. Galeazzi

Respectfully submitted by Deborah A. Galeazzi, City Clerk

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning June 30 20 09 ;
ending June 30 20 09

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of } Menasha

County of Calumet Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number: <u>004-0002858998-01</u>	
Federal Employer Identification Number (FEIN): <u>20-4281269</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Wholesale beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ 50.00
TOTAL FEE	\$

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☒ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Wisconsin CVS Pharmacy, L.L.C.

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>President, Zenon P. Lankowsky,</u>	<u>4 Francis Farm Rd, Harrisville, RI 02830</u>	
Vice President/Member	<u>Vice President, Carol A. DeNale,</u>	<u>75 Poplar Street, Watertown, RI 02472</u>	
Secretary/Member	<u>Secretary, Thomas S. Moffatt,</u>	<u>29 Homestead Circle, Kingston, RI 02881</u>	
Treasurer/Member	<u>Treasurer, Carol A. DeNale,</u>	<u>75 Poplar Street, Watertown, RI 02472</u>	
Agent ▶	<u>Amy Lynn Vandenhagen-Braun, Manager,</u>	<u>151 S Walnut, Kimberly, WI 54136</u>	
Directors/Managers	<u>Director, Zenon P. Lankowsky,</u>	<u>4 Francis Farm Rd, Harrisville, RI 02830</u>	

3. Trade Name ▶ CVS/pharmacy #5186 Business Phone Number pending
4. Address of Premises ▶ 1485 Oneida St. Post Office & Zip Code ▶ Menasha, WI 54952
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? ☐ Yes ☒ No
6. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☒ No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? ☐ Yes ☒ No
8. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 2/8/2006 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☒ Yes ☐ No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☒ Yes ☐ No
- (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Sales floor and storage room
10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☐ Yes ☒ No
- (b) If yes, under what name was license issued? _____
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] ☒ Yes ☐ No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] ☒ Yes ☐ No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this 12th day of August Erika L. Rosa

Erika L. Rosa
Notary Public

(Clerk/Notary Public)

State of Rhode Island

My commission expires 8-9-09 My Commission Expires 08/09/2009

Brenda M. Ambrose
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>8/15/08</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Lankowsky		Zenon	Paul		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
4 Francis Farm Road		Harrisville		RI	02830
HOME PHONE NUMBER	AGE	DATE OF BIRTH		PLACE OF BIRTH	
401-765-1500				Rochester, NY	

The above named individual provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an **individual**.
- ☐ A member of a **partnership** which is making application for an alcohol beverage license.
- ☒ Zenon P. Lankowsky of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.) _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	From	To
CVS Pharmacy, Inc.	One CVS Drive, Woonsocket, RI 02895	10/1984	present

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 20 08
Erika L Rosa
(CLERK/NOTARY PUBLIC)

My commission expires 8-9-09

AT-103 (R 01-01)

Erika L Rosa
 Notary Public
 State of Rhode Island
 My Commission Expires 08/09/2009

[Signature]
(SIGNATURE OF NAMED INDIVIDUAL)


 Printed on Recycled Paper
 Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
DeNale		Carol	Ann		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
75 Poplar Street		Watertown		MA	02472
HOME PHONE NUMBER		AGE	DATE OF BIRTH		PLACE OF BIRTH
401-765-1500					McKeesport, PA

The above named individual provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an individual.
- ☐ A member of a partnership which is making application for an alcohol beverage license.
- ☒ Carol A. DeNale of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.)
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

6. Named individual must list in chronological order last two employers.
- | Employer's Name | Employer's Address | From | Employed To |
|--------------------|-------------------------------------|---------|-------------|
| CVS Pharmacy, Inc. | One CVS Drive, Woonsocket, RI 02895 | 06/1997 | present |

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 20 08
Erika L. Rosa
(CLERK/NOTARY PUBLIC)

Carol A. DeNale
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 8-9-09

Submit to municipal clerk.

The *above named individual* provides the following information as a person who is (check one):

- The *above named individual* provides the following information to the licensing authority:

6. Named individual must list in chronological order last two employers.

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Erika L Rosa
Notary Public
State of Rhode Island
My Commission Expires 08/09/2009



Printed on Recycled Paper
Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Cimbron		Linda	Marie		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
45 Bridge Street		Warren		RI	02285
HOME PHONE NUMBER		AGE	DATE OF BIRTH		PLACE OF BIRTH
401-765-1500					Fall River, MA

The above named individual provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an individual.
- ☐ A member of a partnership which is making application for an alcohol beverage license.
- ☒ Linda M. Cimbron of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.)
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
CVS Pharmacy, Inc.	One CVS Drive, Woonsocket, RI 02895	04/1977	present

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 2008
Erika L Rosa
(CLERK/NOTARY PUBLIC)

Linda M. Cimbron
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 8-9-09

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Luker		Melanie	Kathleen		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
40 Poppy Drive		Cranston,		RI	02920
HOME PHONE NUMBER	AGE	DATE OF BIRTH		PLACE OF BIRTH	
401-765-1500				Pawtucket, RI	

The above named individual provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an **individual**.
- ☐ A member of a **partnership** which is making application for an alcohol beverage license.
- ☒ Melanie K. Luker of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.) _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

Named individual must list in chronological order last two employers.		Employed	
Employer's Name	Employer's Address	From	To
CVS Pharmacy, Inc.	One CVS Drive, Woonsocket, RI 02895	05/1997	present
Goldberg Law Offices	226 Cottage Street, Pawtucket, RI 02860	07/1985	05/1997

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 20 08
Erika L. Rosa
(CLERK/NOTARY PUBLIC)

[Signature]
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 8-9-09

**SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT
ORGANIZATION OR LIMITED LIABILITY COMPANY**

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town/Village/City of Menasha County of Calumet

The undersigned duly authorized officer(s)/members/managers of Wisconsin CVS Pharmacy, L.L.C.
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
CVS/pharmacy #5186

located at 1485 Oneida Street, Menasha, WI 54952
(trade name)

appoints Amy Lynn Vandenhogen-Braun
(name of appointed agent)

151 S. Walnut, Kimberly, WI 54136
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?
☐ Yes ☒ No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? ☐ Yes ☒ No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 27 years

Place of residence last year, 151 S. Walnut Street Kimberly, WI 54136

For: Wisconsin CVS Pharmacy, L.L.C.
(name of corporation/organization/limited liability company)

By: Amy Lynn Vandenhogen-Braun
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Amy Lynn Vandenhogen-Braun
(print/type agent's name), hereby accept this appointment as agent for the

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Amy Lynn Vandenhogen-Braun 08-13-08 Agent's age _____
(signature of agent) (date)
151 S. Walnut, Kimberly, WI 54136 Date of birth _____
(home address of agent)

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 08/13/08 by [Signature] Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

AT-104 (R. 8-03)

Wisconsin Department of Revenue

014/023

08/19/2008 TUE 16:52 FAX 920 967 5273 CITY OF MENASHA



Menasha

City of Menasha • Department of Community Development

To: Debbie Galeazzi
From: Building Inspection Department
Date: 8/28/08

RE: Liquor License Inspection

Address: 1485 Overda St

The premise at the above address has been inspected for compliance with State and Local Building Codes and found to be:

☒ **COMPLIANT**

☐ **NON - COMPLIANT**
Recommend delaying license approval until all Violations are corrected.

Respectfully submitted

Dennis Jansen

City of Menasha Building Inspector

Dan Coffey

City of Menasha Building Inspector



Memorandum

TO: Debbie Galeazzi, City of Menasha Clerk

FROM: Assistant Chief/Fire Marshall Al Auxier

DATE: August 26, 2008

RE: Liquor License, CVS/Pharmacy #5186

Neenah-Menasha Fire Rescue did a liquor license inspection at CVS/Pharmacy #5186, 1485 Oneida St., and found the building in a condition that would allow the approval of the liquor license request for this occupancy.


If you have any questions or concerns please email or give me a call.



City of Menasha • Health Services

Date: August 21, 2008

To: City of Menasha Common Council

From: Todd Drew, R.S. – Sanitarian 
City of Menasha Health Department

**Re: Liquor License Renewal Inspections at
Pharmacy, 1485 Oneida St, Menasha.**

CVS

An inspection was conducted at the above cited establishment which submitted a liquor license application for the July 1, 2008 - June 30, 2009 license year.

The health inspection conducted in these establishments included standard sanitation, equipment condition, food safety, plumbing, employee hygiene, toilet and hand washing facilities, insect and rodent control and general condition using Wisconsin Administrative Code and the Wisconsin Food Code (Food Establishment Code) as a basis for inspection procedures.

Construction and equipment installation is in process and not yet completed. Both locations will require a pre-inspection and appropriate food license prior to opening. The inspections conducted in these establishments did not cite any current health-related violations or concerns based on plan review and discussion with the general contractors which would necessitate a recommendation to hold either of the liquor license applications.

If you should have any questions regarding this information, please do not hesitate to contact me.

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning June 30 20 09 ;
ending June 30 20 09

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of } Menasha

County of Calumet Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number: <u>004-0002858998-01</u>	
Federal Employer Identification Number (FEIN): <u>20-4281269</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Wholesale beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ 50.00
TOTAL FEE	\$

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☒ LIMITED LIABILITY COMPANY
☐ CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Wisconsin CVS Pharmacy, L.L.C.

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>President, Zenon P. Lankowsky,</u>	<u>4 Francis Farm Rd, Harrisville, RI</u>	<u>02830</u>
Vice President/Member	<u>Vice President, Carol A. DeNale,</u>	<u>75 Poplar Street, Watertown, RI</u>	<u>02472</u>
Secretary/Member	<u>Secretary, Thomas S. Moffatt,</u>	<u>29 Homestead Circle, Kingston, RI</u>	<u>02881</u>
Treasurer/Member	<u>Treasurer, Carol A. DeNale,</u>	<u>75 Poplar Street, Watertown, RI</u>	<u>02472</u>
Agent ▶	<u>Amy Lynn Vandenhagen-Braun, Manager,</u>	<u>151 S Walnut, Kimberly, WI</u>	<u>54136</u>
Directors/Managers	<u>Director, Zenon P. Lankowsky,</u>	<u>4 Francis Farm Rd, Harrisville, RI</u>	<u>02830</u>

3. Trade Name ▶ CVS/pharmacy #5186 Business Phone Number pending
4. Address of Premises ▶ 1485 Oneida St. Post Office & Zip Code ▶ Menasha, WI 54952
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? ☐ Yes ☒ No
6. Is the applicant an employee or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☒ No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? ☐ Yes ☒ No
8. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 2/8/2006 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☒ Yes ☐ No
- (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☒ Yes ☐ No
- (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) Sales floor and storage room
10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☐ Yes ☒ No
- (b) If yes, under what name was license issued? _____
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] ☒ Yes ☐ No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] ☒ Yes ☐ No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME

this 12th day of August Erika L. Rosa

Erika L. Rosa
Notary Public

(Clerk/Notary Public)

State of Rhode Island

My commission expires 8-9-09 My Commission Expires 08/09/2009

Brenda M. Ambrose
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>8/15/08</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Lankowsky		Zenon	Paul		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
4 Francis Farm Road		Harrisville		RI	02830
HOME PHONE NUMBER	AGE	DATE OF BIRTH		PLACE OF BIRTH	
401-765-1500				Rochester, NY	

The above named individual provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an **individual**.
- ☐ A member of a **partnership** which is making application for an alcohol beverage license.
- ☒ Zenon P. Lankowsky of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.) _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	From	To
CVS Pharmacy, Inc.	One CVS Drive, Woonsocket, RI 02895	10/1984	present

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.


Subscribed and sworn to before me

this 12th day of August, 20 08
Erika L Rosa
(CLERK/NOTARY PUBLIC)

My commission expires 8-9-09

AT-103 (R 01-01)

Erika L Rosa
 Notary Public
 State of Rhode Island
 My Commission Expires 08/09/2009


(SIGNATURE OF NAMED INDIVIDUAL)

 Printed on Recycled Paper
 Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
DeNale		Carol	Ann		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
75 Poplar Street		Watertown		MA	02472
HOME PHONE NUMBER	AGE	DATE OF BIRTH		PLACE OF BIRTH	
401-765-1500				McKeesport, PA	

The above named individual provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an individual.
- ☐ A member of a partnership which is making application for an alcohol beverage license.
- ☒ Carol A. DeNale of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.)
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

6. Named individual must list in chronological order last two employers.
- | Employer's Name | Employer's Address | From | Employed To |
|--------------------|-------------------------------------|---------|-------------|
| CVS Pharmacy, Inc. | One CVS Drive, Woonsocket, RI 02895 | 06/1997 | present |

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 20 08
Erika L. Rosa
(CLERK/NOTARY PUBLIC)

Carol A. DeNale
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 08-09

Submit to municipal clerk.

The *above named individual* provides the following information as a person who is (check one):

- The *above named individual* provides the following information to the licensing authority:

6. Named individual must list in chronological order last two employers.

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Erika L Rosa
Notary Public
State of Rhode Island
My Commission Expires 08/09/2009



Printed on Recycled Paper
Wisconsin Department of Revenue

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Cimbron		Linda	Marie		
HOME ADDRESS (Street/Route)		POST OFFICE		STATE	ZIP CODE
45 Bridge Street		Warren		RI	02285
HOME PHONE NUMBER		AGE	DATE OF BIRTH		PLACE OF BIRTH
401-765-1500					Fall River, MA

The *above named individual* provides the following information as a person who is (**check one**):

- ☐ Applying for an alcohol beverage license as an **individual**.
- ☐ A member of a **partnership** which is making application for an alcohol beverage license.
- ☒ Linda M. Cimbron of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? n/a
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
 (If yes, identify.) See Attached List
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
 (If yes, identify.)
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
CVS Pharmacy, Inc.	One CVS Drive, Woonsocket, RI 02895	04/1977	present

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 2008
Erika L Rosa
(CLERK/NOTARY PUBLIC)

Linda M. Cimbron
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 8-9-09

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Luker		Melanie	Kathleen		
HOME ADDRESS (Street/Route)			POST OFFICE	STATE	ZIP CODE
40 Poppy Drive			Cranston,	RI	02920
HOME PHONE NUMBER		AGE	DATE OF BIRTH	PLACE OF BIRTH	
401-765-1500				Pawtucket, RI	

The *above named individual* provides the following information as a person who is (check one):

- ☐ Applying for an alcohol beverage license as an **individual**.
- ☐ A member of a **partnership** which is making application for an alcohol beverage license.
- ☒ Melanie K. Luker of Wisconsin CVS Pharmacy, L.L.C.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? n/a
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes ☐ No ☒
(If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes ☐ No ☒
(If yes, describe status of charges pending.)
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes ☒ No ☐
(If yes, identify.) See Attached List
- (NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes ☐ No ☒
(If yes, identify.)
- (NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)

- | 6. Named individual must list in chronological order last two employers. | | | |
|--|---|---------|-------------|
| Employer's Name | Employer's Address | From | Employed To |
| CVS Pharmacy, Inc. | One CVS Drive, Woonsocket, RI 02895 | 05/1997 | present |
| Goldberg Law Offices | 226 Cottage Street, Pawtucket, RI 02860 | 07/1985 | 05/1997 |

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 12th day of August, 20 08
Erin K. Rose
 (CLERK/NOTARY PUBLIC)

(Signature)

My commission expires 8-9-09

**SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT
ORGANIZATION OR LIMITED LIABILITY COMPANY**

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town/Village/City of Menasha County of Calumet

The undersigned duly authorized officer(s)/members/managers of Wisconsin CVS Pharmacy, L.L.C.
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
CVS/pharmacy #5186

located at 1485 Oneida Street, Menasha, WI 54952
(trade name)

appoints Amy Lynn Vandenhogen-Braun
(name of appointed agent)

151 S. Walnut, Kimberly, WI 54136
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?
☐ Yes ☒ No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Is applicant agent subject to completion of the responsible beverage server training course? ☐ Yes ☒ No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 27 years

Place of residence last year, 151 S. Walnut Street Kimberly, WI 54136

For: Wisconsin CVS Pharmacy, L.L.C.
(name of corporation/organization/limited liability company)

By: *Amy Lynn Vandenhogen-Braun*
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Amy Lynn Vandenhogen-Braun
(print/type agent's name), hereby accept this appointment as agent for the

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Amy Lynn Vandenhogen-Braun 08-13-08
(signature of agent) (date)

151 S. Walnut, Kimberly, WI 54136
(home address of agent) Agent's age _____ Date of birth _____

**APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)**

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 08/13/08 by *[Signature]* Title Police Chief
(date) (signature of proper local official) (town chair, village president, police chief)

AT-104 (R. 8-03)

Wisconsin Department of Revenue

014/023

08/19/2008 TUE 16:52 FAX 920 967 5273 CITY OF MENASHA



Menasha

City of Menasha • Department of Community Development

To: Debbie Galeazzi
From: Building Inspection Department
Date: 8/28/08

RE: Liquor License Inspection

Address: 1485 Overda St

The premise at the above address has been inspected for compliance with State and Local Building Codes and found to be:

☒ **COMPLIANT**

☐ **NON - COMPLIANT**
Recommend delaying license approval until all Violations are corrected.

Respectfully submitted

Dennis Jansen

City of Menasha Building Inspector

Dan Coffey

City of Menasha Building Inspector



Memorandum

TO: Debbie Galeazzi, City of Menasha Clerk
FROM: Assistant Chief/Fire Marshall Al Auxier
DATE: August 26, 2008
RE: Liquor License, CVS/Pharmacy #5186

Neenah-Menasha Fire Rescue did a liquor license inspection at CVS/Pharmacy #5186, 1485 Oneida St., and found the building in a condition that would allow the approval of the liquor license request for this occupancy.


If you have any questions or concerns please email or give me a call.



City of Menasha • Health Services

Date: August 21, 2008

To: City of Menasha Common Council

From: Todd Drew, R.S. – Sanitarian 
City of Menasha Health Department

**Re: Liquor License Renewal Inspections at
Pharmacy, 1485 Oneida St, Menasha.**

CVS

An inspection was conducted at the above cited establishment which submitted a liquor license application for the July 1, 2008 - June 30, 2009 license year.

The health inspection conducted in these establishments included standard sanitation, equipment condition, food safety, plumbing, employee hygiene, toilet and hand washing facilities, insect and rodent control and general condition using Wisconsin Administrative Code and the Wisconsin Food Code (Food Establishment Code) as a basis for inspection procedures.

Construction and equipment installation is in process and not yet completed. Both locations will require a pre-inspection and appropriate food license prior to opening. The inspections conducted in these establishments did not cite any current health-related violations or concerns based on plan review and discussion with the general contractors which would necessitate a recommendation to hold either of the liquor license applications.

If you should have any questions regarding this information, please do not hesitate to contact me.



TO: Mayor Merkes
Menasha Common Council

FROM: Lt. Chuck Sahr *Sahr*

RE: Livescan grant

DATE: August 27, 2008

In a memo dated July 7, 2008, I provide a brief description of the "Livescan Implementation" grant that was awarded to the city of Menasha. The grant (\$17,000) is an 80/20 cost share grant through the U.S. Department of Justice administered through the Wisconsin Office of Justice Assistance that will enable the Menasha Police Department to acquire digital fingerprinting equipment and software that meets Wisconsin electronic fingerprint standards. In fulfilling this grant, we selected two vendors and invited them to the Police Department to provide an on-site demonstration of their products to our staff.

The quotes (copies attached) between the two companies were similar for the overall package. However, we determined the Livescan solution provided by ID Networks, Inc. was the better choice. The decision was based on the type and quality of equipment being supplied, a software package and support system that was user-friendly and better suited to the needs of our Department, a proven history with and capability to interface with our county-wide Records Management System. ID Networks, Inc. is also currently providing service to numerous other Wisconsin agencies (most notably Winnebago County Sheriff, Neenah PD, Appleton PD, and Outagamie County Sheriff). Since the system is already being used by several local agencies, the opportunity exists for cooperative efforts in providing future enhancements.

The price of the chosen Livescan system, provided by ID Networks, Inc. is \$17,390. At this time, I am seeking approval and authorization from the Menasha Common Council for the purchase in this amount. The grant will then reimburse Menasha for \$13,600. The balance, Menasha's out of pocket expense, will be \$3,790.

The acquisition and installation of the Livescan system from ID Networks, Inc. will take about two weeks. The grant may be used until September 30, 2008.

c.c. Chief Stanke
enclosures



1-866-589-5634

Menasha Police Department
Chuck Sahr
430 First Street
Menasha, Wisconsin 54952

Date: June 17, 2008

Quote # 061708

RE: LiveScan SYSTEM.

Quote Prepared by	Job	Preferred Payment Terms	Expires
Kathleen Paynter		40% on Contract, Balance due 15 days after Delivery	Sept 17, 2008

5

Qty	Description	Total
1 emaCIS	Complete LiveScan System (emaCIS software & LiveScan Full 10-print with Printing capability, WI Criminal and Applicant Transactions. Includes ability to see Results of Submissions (WI SID number) via web browser interface to DOJ. Personal Computer (Pentium 4, 1GB RAM, 80MG Hard Drive, Monitor, Mouse, Keyboard, CD-RW Drive (No Floppy). First Year Maintenance & 24x7 Support Included. All systems Certified.	\$12,905.00
1 CS-IST	Set-Up, Training & Installation – (2 days for training in shifts)	\$2,000.00
Subtotal		\$14,905.00
1 PRT-LEXT640DN	(Optional) Lexmark T640DN FBI-Certified Printer –print to fingerprint card – WI Applicant, Court Disposition, CAR	\$1,200.00
1	(Optional) Mobile Security Locking Cabinet	\$1,200.00
(Will need Tax Exempt Number) Sales Tax		0.00
Total		\$17,305.00
Annual Service, Maintenance & Support -Next Day Replacement on Unit		\$3,480.00

NOTES:

Installation will be scheduled in advance and will occur within 2 weeks of contract. It is the agencies responsibility to ensure all connections to submit prints are implemented and activated prior to our arrival.

This is a quotation on the goods named, subject to the conditions noted below: (Describe any conditions pertaining to these prices and any additional terms of the agreement. You may want to include contingencies that will affect the quotation.)

To accept this quotation, sign here and return: _____

We are a Wisconsin Owned and Operated Company specializing in Servicing the Wisconsin Law Enforcement Community. On-Site Support is less then 4 hours away.

Toll-free Number for 24x7 Experienced Phone Support.

Fahlgreen Biometric Solutions LLC ~ P O Box 660 ~ 15 Main Street, Montello, WI 53949

866-589-5634

fahlgreen@maqs.net ° www.fahlgreensolutions.com



WI - Criminal Livescan Pricing

ID Networks, Inc.
7720 Jefferson Road, Ashtabula, OH 44004
Phone: (440)992-0062 Fax: (440)992-1109
sales@idnetworks.com

QUOTE #: 08-0813-03
DATE: 8/13/2008

TO: Chuck Sahr
Menasha Police Department
920-967-3500
csahr@ci.menasha.wi.us

ITEM #	DESCRIPTION	QTY	UNIT PRICE	EXT PRICE
FR-APP	Desktop Livescan System with 10-print Capture <ul style="list-style-type: none"> FingerRoll Livescan Software Fingerprint Scanner Latest PC Technology, XP configuration FREE demographic data import FREE Photo Capture software Permanent History for data, photo & FP 	1	\$14,255	\$14,255
Delivery	Onsite Installation, Training & Travel	1	\$995	\$995
Maintenance	Our full-coverage maintenance plan is included for one year	1	Included	Included
BASE SYSTEM PRICE				\$15,250
EQUIPMENT OPTIONS				
Palm Upgrade	Palm Upgrade with Integrated Full Hand Technology – at time of order (Rugged Cabinet Required)	1	\$11,460	
Cabinet	Ruggedized Cabinet with 17" LCD Display	1	\$3,795	
Printer	Lexmark T640 Network Printer with Duplexer and Additional Tray	1	\$1,645	\$1,645
DL Scanner	Driver's License Scanner (All 50 US Driver's Licenses)	1	\$495	\$495
Capture Kit	Camera Capture Kit – Lights, camera, mounts, electronics, cables	1	\$2,195	
Hard Drive	300 GB external Hard Drive for Backups	1	\$450	
SOFTWARE & SERVICE OPTIONS				
IDImage	Police Booking, Photo Management & Investigative Line-Up Software - price based on user licenses	2 User Licenses	1	\$4,995
		10 User Licenses	1	\$7,995
		25 User Licenses	1	\$14,995
IDArchive	Reginal Web based NIST Archive Sharing Software (SQL version, Server License only, NO client license required) – does not include Server or SQL Server licenses.	1	\$9,995 & Up	
Other Services	Additional Technical Services – Onsite Services, Integration, Conversion, Programming, etc. – per day rate	1	\$895 / Day	
EQUIPMENT OPTION TOTAL				\$1,645 #2,140
TOTAL SYSTEM COST				\$16,895 #17,390

NOTES

- Subsequent Years Maintenance - \$3,495 (10-Print System) + 10% of applicable items



TO: Mayor Merkes
Menasha Common Council

FROM: Lt. Chuck Sahr *Sahr*

RE: Livescan grant

DATE: August 27, 2008

In a memo dated July 7, 2008, I provide a brief description of the "Livescan Implementation" grant that was awarded to the city of Menasha. The grant (\$17,000) is an 80/20 cost share grant through the U.S. Department of Justice administered through the Wisconsin Office of Justice Assistance that will enable the Menasha Police Department to acquire digital fingerprinting equipment and software that meets Wisconsin electronic fingerprint standards. In fulfilling this grant, we selected two vendors and invited them to the Police Department to provide an on-site demonstration of their products to our staff.

The quotes (copies attached) between the two companies were similar for the overall package. However, we determined the Livescan solution provided by ID Networks, Inc. was the better choice. The decision was based on the type and quality of equipment being supplied, a software package and support system that was user-friendly and better suited to the needs of our Department, a proven history with and capability to interface with our county-wide Records Management System. ID Networks, Inc. is also currently providing service to numerous other Wisconsin agencies (most notably Winnebago County Sheriff, Neenah PD, Appleton PD, and Outagamie County Sheriff). Since the system is already being used by several local agencies, the opportunity exists for cooperative efforts in providing future enhancements.

The price of the chosen Livescan system, provided by ID Networks, Inc. is \$17,390. At this time, I am seeking approval and authorization from the Menasha Common Council for the purchase in this amount. The grant will then reimburse Menasha for \$13,600. The balance, Menasha's out of pocket expense, will be \$3,790.

The acquisition and installation of the Livescan system from ID Networks, Inc. will take about two weeks. The grant may be used until September 30, 2008.

c.c. Chief Stanke
enclosures



1-866-589-5634

Menasha Police Department
Chuck Sahr
430 First Street
Menasha, Wisconsin 54952

Date: June 17, 2008

Quote # 061708

RE: LiveScan SYSTEM.

Quote Prepared by	Job	Preferred Payment Terms	Expires
Kathleen Paynter		40% on Contract, Balance due 15 days after Delivery	Sept 17, 2008

5

Qty	Description	Total
1 emaCIS	Complete LiveScan System (emaCIS software & LiveScan Full 10-print with Printing capability, WI Criminal and Applicant Transactions. Includes ability to see Results of Submissions (WI SID number) via web browser interface to DOJ. Personal Computer (Pentium 4, 1GB RAM, 80MG Hard Drive, Monitor, Mouse, Keyboard, CD-RW Drive (No Floppy). First Year Maintenance & 24x7 Support Included. All systems Certified.	\$12,905.00
1 CS-IST	Set-Up, Training & Installation – (2 days for training in shifts)	\$2,000.00
Subtotal		\$14,905.00
1 PRT-LEXT640DN	(Optional) Lexmark T640DN FBI-Certified Printer –print to fingerprint card – WI Applicant, Court Disposition, CAR	\$1,200.00
1	(Optional) Mobile Security Locking Cabinet	\$1,200.00
(Will need Tax Exempt Number) Sales Tax		0.00
Total		\$17,305.00
Annual Service, Maintenance & Support -Next Day Replacement on Unit		\$3,480.00

NOTES:

Installation will be scheduled in advance and will occur within 2 weeks of contract. It is the agencies responsibility to ensure all connections to submit prints are implemented and activated prior to our arrival.

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EQUIPMENT OPTION TOTAL				\$1,645 #2,140
TOTAL SYSTEM COST				\$16,895 #17,390

NOTES

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CITY OF MENASHA DISBURSEMENTS

Accounts Payable for 8/21/08-8/28/08	\$ 912,075.03
Checks # 18127-18317	

Payroll Checks for 8/21/08-8/28/08	<u>159,528.59</u>
Checks # 40508-40783	

Total	\$ 1,071,603.62
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**Gaps in the sequence of accounts payable check numbers may be caused by: voiding checks at the start of a new check run to set up printing of the checks correctly, having a large number of invoices on a particular vendor which causes the payment to be printed on more than one accounts payable check , incorrect alphabetizing of a vendor causing the accounts payable check to appear out of sequence or software/printer problems which result in accounts payable checks being printed incorrectly and needing to be discarded.

Menasha Employees Credit Union-Employee Deductions

Menasha Employees Local 1035-Union Dues

Menasha Employees Local 1035B-Union Dues

Wisconsin Support Collections-Child/Spousal Support

United Way-Employee Donations

AMT-Garnishments

Date: Thursday, August 21, 2008
Time: 09:09AM
User: MGRIESBACH

CITY OF MENASHA
Check Register - w/Alternate Description

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Company: 31100

Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
01054 ACCENT FLORAL & GIFTS LLC	378	31100	55	04-221-316	40.00	KOFFARNUS FATHER/BURSACK IN LW
	Check Date	8/21/2008	Check Nbr	018127	Check Total:	40.00
01790 ARING EQUIPMENT CO INC	366524	31731	54	10-149-383	22.74	OIL FILTER
	Check Date	8/21/2008	Check Nbr	018128	Check Total:	22.74
05145 ALAN AVERY	080908	31100	55	07-201-203	865.00	GRUNSKI TIMING SERVICES
	Check Date	8/21/2008	Check Nbr	018136	Check Total:	865.00
02040 BADGER HIGHWAYS CO INC	141633	31100	54	10-122-300	101.76	HOTMIX ASPHALT BASE COURSE
	141681	31100	54	10-121-300	36.26	HOTMIX ASPHALT SURFACE COURSE
	141681	31100	54	10-122-300	103.39	HOTMIX ASPHALT SURFACE COURSE
	141681	31100	54	10-134-300	40.18	HOTMIX ASPHALT SURFACE COURSE
	141682	31100	55	07-202-300	13.12	SCREENINGS/JEFFERSON PARK
	141634	31100	55	07-202-300	16.29	SCREENINGS/JEFFERSON PARK
	Check Date	8/21/2008	Check Nbr	018129	Check Total:	311.00
02335 BECK ELECTRIC INC	E209	31100	55	07-202-240	62.00	REPAIR PATH LIGHT/JEFFERSON
	E154	31100	55	07-203-243	88.04	REPAIR POOL SLIDE PUMP
	E92	31201	54	10-301-212	177.32	TROUBLE SHOOT LIFT STATIONS
	E178	31100	54	10-131-216	1,788.70	REIMBURSEABLE ACCIDENT
	E178	31100	54	10-131-300	94.51	REIMBURSEABLE ACCIDENT
	E94	31100	54	10-143-216	345.30	REIMBURSABLE ACCIDENT
	E94	31100	54	10-143-300	100.33	REIMBURSABLE ACCIDENT
	E189	31100	54	10-131-216	131.44	WALK LIGHT REPAIR/WASHINGTON
	E210	31100	55	10-215-216	54.00	TRAFFIC LIGHT REPAIR/RACINE
	Check Date	8/21/2008	Check Nbr	018130	Check Total:	2,841.64
02684 BOWERS & SONS CONSTRUCTION INC	2006-07(3)	31485	21	04-205-000	10,525.06	PROVINCE/JENNIE/NORMAN WAY
	2006-07(3)	31485	54	10-121-822	35,196.60	PROVINCE/JENNIE/NORMAN WAY
	Check Date	8/21/2008	Check Nbr	018131	Check Total:	45,721.66

Date: Thursday, August 21, 2008
Time: 09:09AM
User: MGRIESBACH

CITY OF MENASHA
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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
02796 BUBRICK'S	148487	31731	54	10-149-310	35.13	OFFICE SUPPLIES
	148770	31100	52	08-101-310	118.88	MICRO PERF PAPER
	Check Date	8/21/2008	Check Nbr	018132	Check Total:	154.01
03070 CALUMET COUNTY TREASURER	9900032	31100	51	02-117-243	94.90	CODING & BALLOT CHARGES/NOTICS
	9900032	31100	51	02-117-291	501.26	CODING & BALLOT CHARGES/NOTICS
	9900032	31100	51	02-117-292	132.17	CODING & BALLOT CHARGES/NOTICS
	Check Date	8/21/2008	Check Nbr	018133	Check Total:	728.33
04275 DIGICORPORATION	54003	31100	55	07-202-291	75.00	BOAT LAUNCH FORMS
	Check Date	8/21/2008	Check Nbr	018135	Check Total:	75.00
06115 FERRELLGAS	1023002894	31266	54	10-307-216	63.54	33 LB CYL
	Check Date	8/21/2008	Check Nbr	018137	Check Total:	63.54
06565 FOX VALLEY HUMANE ASSOCIATION	081308	31100	53	08-115-250	1,033.35	21 ANIMALS JULY 2008
	Check Date	8/21/2008	Check Nbr	018138	Check Total:	1,033.35
08537 HSBC BUSINESS SOLUTIONS	1296000032889	31100	51	04-107-310	5.29	BINDER CLIPS
	1296000032889	31100	53	09-102-310	19.99	PRINTER INK/HEALTH
	Check Date	8/21/2008	Check Nbr	018139	Check Total:	25.28
09128 INFRASTRUCTURE TECHNOLOGIES	PR-1450701D-05	31201	19	04-540-000	22,205.46	WW COLL SYS REHAB IMPROV-3
	PR-1450701D-05	31201	21	04-205-000	-1,110.27	WW COLL SYS REHAB IMPROV-3
	Check Date	8/21/2008	Check Nbr	018140	Check Total:	21,095.19
09150 INSITUFORM TECHNOLOGIES USA	PR-1450701A-05	31201	19	04-540-000	185,406.00	WW COLL SYS REHAB IMPROV-3
	Check Date	8/21/2008	Check Nbr	018141	Check Total:	185,406.00

Date: Thursday, August 21, 2008
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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
10335 JX ENTERPRISES INC	D282050042	31731	54	10-149-383	-307.02	PLATE COVER
	D281680135	31731	54	10-149-383	240.52	ASST BALL & SOCKET
Check Date	8/21/2008	Check Nbr	018142	Check Total:	-66.50	
11030 KAEMPFER & ASSOCIATES INC	14061	31201	54	10-301-212	713.24	IND DISC REG PROG/ALCAN PACKAG
	14062	31201	54	10-301-212	874.59	IND DISC REG PROG/METER CALIBR
	14063	31201	54	10-301-212	1,683.86	IND DISC REG PROG-SEWER MONITR
	14064	31201	19	04-540-000	4,734.37	WW COLL SYS REHAB IMPR-PHASE 3
Check Date	8/21/2008	Check Nbr	018143	Check Total:	8,006.06	
12125 LAND AMERICA FOX CITIES TITLE&	081908	31263	56	03-207-701	3,500.00	CDBG PROGRAM
Check Date	8/21/2008	Check Nbr	018144	Check Total:	3,500.00	
12250 LAWSON PRODUCTS INC	7092036	31731	54	10-149-300	328.14	STOCK
Check Date	8/21/2008	Check Nbr	018145	Check Total:	328.14	
12375 LEVENHAGEN CORPORATION	64485	31207	55	07-205-381	4,700.19	LEAD FREE GAS
	66031	31207	55	07-205-381	1,659.37	LEAD FREE GAS
	66046	31207	55	07-205-381	4,896.30	LEAD FREE GAS
Check Date	8/21/2008	Check Nbr	018146	Check Total:	11,255.86	
13045 MANDERFIELD BAKERY	288382	31100	53	09-118-300	16.50	COOKIES
Check Date	8/21/2008	Check Nbr	018147	Check Total:	16.50	
13149 MATTHEWS COMMERCIAL TIRE CTR	026255	31731	54	10-149-383	46.53	TIRE REPAIR
	026348	31731	54	10-149-382	45.64	LAWN MOWER FLAT REPAIR
	026328	31731	54	10-149-382	31.23	REPAIR TRUCK FLAT
	026329	31731	54	10-149-382	221.96	TIRE REPAIR
	026349	31731	54	10-149-382	9.55	IND TUBE
Check Date	8/21/2008	Check Nbr	018148	Check Total:	354.91	

Date: Thursday, August 21, 2008
Time: 09:09AM
User: MGRIESBACH

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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
13270 MCNEILUS TRUCK & MFG COMPANY	793516	31731	54	10-149-383	140.75	CABLE KIT
Check Date	8/21/2008	Check Nbr	018149	Check Total:	140.75	
13345 MENARDS-APPLETON EAST	89721	31100	53	09-212-300	11.92	BULLETIN BOARDS
Check Date	8/21/2008	Check Nbr	018150	Check Total:	11.92	
13360 MENASHA ELECTRIC & WATER UTILI	080508	31100	12	04-399-000	1,441.74	FIRE DEPT
	080508	31100	12	04-399-000	188.04	FIRE DEPT
	080508	31100	12	04-399-000	5.97	TRAFFIC LIGHTS
	080508	31100	52	08-101-223	1,990.98	POLICE DEPT
	080508	31100	52	08-101-225	259.67	POLICE DEPT
	080508	31100	54	10-131-223	259.55	TRAFFIC LIGHTS
	080508	31100	54	10-131-225	45.13	TRAFFIC LIGHTS
	080508	31731	54	10-149-223	1,149.54	PWF
	080508	31731	54	10-149-225	445.24	PWF
	080508	31201	54	10-301-223	24.07	LIFT STATIONS
	080508	31266	54	10-308-223	8.48	RECYCLING
	080508	31100	55	06-101-223	3,617.64	LIBRARY
	080508	31100	55	06-101-225	755.92	LIBRARY
	080508	31100	55	07-202-223	2,077.13	PARKS
	080508	31100	55	07-202-225	42.22	PARKS
	080508	31100	55	07-203-223	2,653.84	SWIMMING POOL
	080508	31100	55	07-203-225	2,836.74	SWIMMING POOL
	080508	31207	55	07-205-225	41.59	LIGHTS
	080508	31100	55	10-215-223	184.11	LIFT BRIDGES
Check Date	8/21/2008	Check Nbr	018151	Check Total:	18,027.60	
13370 MENASHA EMPLOYEES CREDIT UNION		31100	21	04-299-020	1,857.00	
Check Date	8/21/2008	Check Nbr	018152	Check Total:	1,857.00	

Date: Thursday, August 21, 2008
Time: 09:09AM
User: MGRIESBACH

CITY OF MENASHA
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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
13375 MENASHA EMPLOYEES LOCAL 1035		31100	21	04-299-031	300.00	
Check Date	8/21/2008	Check Nbr	018153	Check Total:	300.00	
13400 MENASHA JOINT SCHOOL DISTRICT	081908	31100	41	04-103-000	5,923.96	AUGUST MOBILE HOME TAX
Check Date	8/21/2008	Check Nbr	018154	Check Total:	5,923.96	
13723 MODERN DAIRY INC	166528	31100	55	07-203-317	35.00	POOL CONCESSIONS
	166403	31100	55	07-203-317	539.79	POOL CONCESSIONS
Check Date	8/21/2008	Check Nbr	018155	Check Total:	574.79	
13742 DAVID MOORE	80727	31100	55	07-201-203	200.00	GRUNSKI MILE MARKER FEE
Check Date	8/21/2008	Check Nbr	018156	Check Total:	200.00	
14010 N&M AUTO SUPPLY	225538	31731	54	10-149-383	-36.50	CORE DEPOSITS
	228532	31731	54	10-149-383	-266.96	ELECTRIC FUEL PUMP
	228442	31731	54	10-149-383	293.46	FUEL PUMP
	228317	31731	54	10-149-383	266.96	FUEL PUMP
	228610	31731	54	10-149-383	27.46	OIL FILTER/STOCK
Check Date	8/21/2008	Check Nbr	018157	Check Total:	284.42	

Date: Thursday, August 21, 2008
Time: 09:09AM
User: MGRIESBACH

CITY OF MENASHA
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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
03405 ONE COMMUNICATIONS	080208	31100	12	04-399-000	11.61	BUILDING INSPECTION
	080208	31100	12	04-399-000	411.66	MENASHA UTILITY
	080208	31207	12	04-399-000	28.35	MARINA
	080208	31100	51	01-102-221	11.75	MAYOR
	080208	31100	51	02-103-221	6.27	ATTORNEY
	080208	31100	51	02-104-221	16.68	CLERK
	080208	31100	51	02-105-221	16.86	PERSONNEL
	080208	31100	51	04-106-221	48.68	FINANCE
	080208	31100	51	04-107-221	5.29	ASSESSOR
	080208	31100	51	04-109-221	21.88	IT
	080208	31100	51	10-115-221	64.84	CITY HALL
	080208	31100	52	05-701-221	63.50	EOC
	080208	31100	52	08-101-221	367.91	POLICE
	080208	31100	53	09-102-221	86.86	HEALTH
	080208	31100	53	09-212-221	34.96	SENIOR CENTER
	080208	31100	54	10-111-221	59.66	ENGINEERING
	080208	31100	54	10-131-221	5.29	SIGN
	080208	31731	54	10-149-221	45.41	GARAGE
	080208	31100	55	06-101-221	177.96	LIBRARY
	080208	31100	55	07-201-221	25.80	REC
	080208	31100	55	07-202-221	89.61	PARKS
	080208	31100	55	07-203-221	51.20	POOL
	080208	31100	55	10-215-221	38.10	BRIDGE
	080208	31100	56	03-202-221	27.60	COM DEV
Check Date 8/21/2008 Check Nbr 018134 Check Total:					1,717.73	
16025 PACKER CITY INTERNATIONAL	3282110023	31731	54	10-149-383	65.55	CRIMP
	Check Date 8/21/2008 Check Nbr 018160 Check Total:					65.55
16454 POOL WORKS INC	215458	31100	55	07-202-300	144.98	SUPPLIES FOR FOUNTAINS
	Check Date 8/21/2008 Check Nbr 018161 Check Total:					144.98

Date: Thursday, August 21, 2008
Time: 09:09AM
User: MGRIESBACH

CITY OF MENASHA
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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
16864 PROFESSIONAL PROCESS SERVICE	6733	31100	51	02-103-211	40.00	SUBPEONA
	Check Date	8/21/2008	Check Nbr	018162	Check Total:	40.00
17110 QUARLES & BRADY	081408	31490	51	04-311-211	6,000.00	
	081408	31490	51	04-311-211	9,500.00	
	Check Date	8/21/2008	Check Nbr	018163	Check Total:	15,500.00
18200 REINDERS INC	849708-00	31100	54	10-502-300	125.00	ROUNDUP
	849877-00	31100	55	07-202-300	134.25	LAWN SEED MIX
	1214953-00	31731	54	10-149-383	34.30	PAUL LEVER ASM
	Check Date	8/21/2008	Check Nbr	018164	Check Total:	293.55
18400 ROAD EQUIPMENT	487584	31731	54	10-149-383	0.96	TANG WASHER
	487903	31731	54	10-149-383	31.02	D-RING
	Check Date	8/21/2008	Check Nbr	018165	Check Total:	31.98
18430 ROLAND MACHINERY EXCHANGE	21043406	31731	54	10-149-383	-258.94	TEMPERATURE GAG
	21043406	31731	54	10-149-383	311.95	TEMPERATURE GAG
	Check Date	8/21/2008	Check Nbr	018166	Check Total:	53.01
19080 SAM'S CLUB	082008	31100	55	07-203-317	1,873.17	POOL CONCESSIONS
	Check Date	8/21/2008	Check Nbr	018167	Check Total:	1,873.17
19356 SHERWIN-WILLIAMS CO	9104-0	31100	54	10-131-300	41.08	PAINT/STAIN
	Check Date	8/21/2008	Check Nbr	018168	Check Total:	41.08
19707 THOMAS STOFFEL	081508	31100	51	04-106-331	44.46	MILEAGE/TAXROLL DELINQ WIN/CAL
	Check Date	8/21/2008	Check Nbr	018169	Check Total:	44.46

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19710 GORDON N STOWE ASSOCIATES	384395	31100	53	09-102-243	160.00	AUDIOMETER CALIBRATION
Check Date	8/21/2008	Check Nbr	018170	Check Total:	160.00	
19725 STREICHERS PROF POLICE EQUIPME	I542591	31100	52	08-101-315	117.99	LIGHT FOR GUN
	I542271	31100	52	08-109-315	53.99	WHISTLES
Check Date	8/21/2008	Check Nbr	018171	Check Total:	171.98	
20030 BRENDA TAUBEL	080708	31100	51	02-105-331	104.72	MILEAGE/BENEFIT SEMINAR
Check Date	8/21/2008	Check Nbr	018172	Check Total:	104.72	
20115 TESCH CHEMICAL CO INC	TC110996	31100	55	07-203-313	13.28	DEGREASER CONCENTRATE
Check Date	8/21/2008	Check Nbr	018173	Check Total:	13.28	
20290 TOUGH SOLUTIONS	TSI3332094	31100	52	08-101-295	31.00	VEHICLE LEG KIT
Check Date	8/21/2008	Check Nbr	018174	Check Total:	31.00	
21045 UNIFIRST CORPORATION	0970035738	31731	54	10-149-201	80.58	MAT/MOP/CLOTHING PROTECTION
Check Date	8/21/2008	Check Nbr	018175	Check Total:	80.58	
15190 VEOLIA ENVIRONMENTAL SERVICES	B4201335	31100	12	04-399-000	77.28	BROAD ST RECYCLING
Check Date	8/21/2008	Check Nbr	018159	Check Total:	77.28	
22430 VISION INSURANCE PLAN OF AMERI	63036	31100	21	04-619-005	1,109.70	EMPLOYEES
Check Date	8/21/2008	Check Nbr	018176	Check Total:	1,109.70	
22445 VISTEN CO INC	70930	31100	54	10-131-300	493.00	REIMBURSE ACCIDENT REPAIR
Check Date	8/21/2008	Check Nbr	018177	Check Total:	493.00	

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23045 WALMART COMMUNITY	080308	31100	55	07-201-300	21.43	PROGRAM SUPPLIES
Check Date	8/21/2008	Check Nbr	018178	Check Total:	21.43	
23152 WE ENERGIES	080408	31100	55	07-202-223	35.43	MENASHA CONSERVANCY
	080508	31100	55	07-202-224	8.12	2170 PLANK RD
Check Date	8/21/2008	Check Nbr	018179	Check Total:	43.55	
23215 WIL-KIL PEST CONTROL	1332042	31100	55	10-215-207	25.00	RAT/MOUSE/SPIDERS
Check Date	8/21/2008	Check Nbr	018180	Check Total:	25.00	
23275 WINNEBAGO COUNTY TREASURER	SHJ100432	31100	52	08-602-250	726.00	JAIL DIVISION
Check Date	8/21/2008	Check Nbr	018181	Check Total:	726.00	
23455 WISCONSIN SUPPORT COLLECTIONS		31100	21	04-299-015	536.31	
		31100	21	04-299-016	138.40	
Check Date	8/21/2008	Check Nbr	018182	Check Total:	674.71	
14235 NEENAH-MENASHA YMCA	2838	31100	52	08-101-216	90.00	FITNESS ASSESSMENTS/POLICE
Check Date	8/21/2008	Check Nbr	018158	Check Total:	90.00	
Grand Total:					332,725.89	

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01160 ALLIANCE ENTERTAINMENT CORP	PJB31952351	31100	55	06-101-314	36.91	LIBRARY MATERIALS
	PJB32086621	31100	55	06-101-314	545.32	LIBRARY MATERIALS
	PJB32175709	31100	55	06-101-314	28.18	LIBRARY MATERIALS
	PJB32237706	31100	55	06-101-314	33.18	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018183	Check Total:	643.59
01869 AT&T	608T66150008	31100	55	06-101-314	41.01	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018184	Check Total:	41.01
02115 BAKER & TAYLOR INC	5009229998	31100	55	06-101-314	77.22	LIBRARY MATERIALS
	500927883	31100	55	06-101-314	28.02	LIBRARY MATERIALS
	H38375600	31100	55	06-101-314	41.02	LIBRARY MATERIALS
	H38375601	31100	55	06-101-314	43.12	LIBRARY MATERIALS
	H38484240	31100	55	06-101-314	86.38	LIBRARY MATERIALS
	H38969410	31100	55	06-101-314	105.79	LIBRARY MATERIALS
	H38969411	31100	55	06-101-314	78.45	LIBRARY MATERIALS
	H39014370	31100	55	06-101-314	28.79	LIBRARY MATERIALS
	H39014371	31100	55	06-101-314	43.12	LIBRARY MATERIALS
	H39147370	31100	55	06-101-314	17.96	LIBRARY MATERIALS
	H215191CM	31100	55	06-101-314	-24.94	CREDIT
	H39628910	31100	55	06-101-314	41.70	LIBRARY MATERIALS
	H39628911	31100	55	06-101-314	20.15	LIBRARY MATERIALS
	H40409230	31100	55	06-101-314	144.63	LIBRARY MATERIALS
	H40665210	31100	55	06-101-314	329.41	LIBRARY MATERIALS
	H40665230	31100	55	06-101-314	113.60	LIBRARY MATERIALS
	H40742430	31100	55	06-101-314	19.43	LIBRARY MATERIALS
	H40867300	31100	55	06-101-314	14.38	LIBRARY MATERIALS
	S35060160	31100	55	06-101-314	17.99	LIBRARY MATERIALS
	H41208450	31100	55	06-101-314	87.78	LIBRARY MATERIALS
	H41208451	31100	55	06-101-314	17.99	LIBRARY MATERIALS
	H41250250	31100	55	06-101-314	35.95	LIBRARY MATERIALS
	2021408877	31100	55	06-101-314	451.87	LIBRARY MATERIALS

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	2021425480	31100	55	06-101-314	290.78	LIBRARY MATERIALS
	2021426701	31100	55	06-101-314	627.42	LIBRARY MATERIALS
	2021433810	31100	55	06-101-314	442.28	LIBRARY MATERIALS
	2021457453	31100	55	06-101-314	153.83	LIBRARY MATERIALS
	2021469586	31100	55	06-101-314	647.62	LIBRARY MATERIALS
	2021476870	31100	55	06-101-314	346.21	LIBRARY MATERIALS
	2021505604	31100	55	06-101-314	265.08	LIBRARY MATERIALS
	2021519061	31100	55	06-101-314	485.85	LIBRARY MATERIALS
	2021527267	31100	55	06-101-314	433.89	LIBRARY MATERIALS
	2021558327	31100	55	06-101-314	253.87	LIBRARY MATERIALS
	2021573610	31100	55	06-101-314	436.97	LIBRARY MATERIALS
	2021590421	31100	55	06-101-314	746.37	LIBRARY MATERIALS
	2021610035	31100	55	06-101-314	392.06	LIBRARY MATERIALS
	2021639184	31100	55	06-101-314	300.23	LIBRARY MATERIALS
	2021639476	31100	55	06-101-314	694.00	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018188	Check Total:	8,336.27
02634 BOOK FARM INC	0011435	31100	55	06-101-314	18.83	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018189	Check Total:	18.83
02635 BOOK WHOLESALERS INC	2969801	31100	55	06-101-314	-18.23	CREDIT
	M272998A	31100	55	06-101-314	94.15	LIBRARY MATERIALS
	M277971A	31100	55	06-101-314	33.22	LIBRARY MATERIALS
	M281104A	31100	55	06-101-314	54.86	LIBRARY MATERIALS
	M283801A	31100	55	06-101-314	29.83	LIBRARY MATERIALS
	M283800A	31100	55	06-101-314	95.63	LIBRARY MATERIALS
	M286557A	31100	55	06-101-314	35.00	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018190	Check Total:	324.46
03247 CDW GOVERNMENT INC	LCB7334	31100	55	06-101-310	267.02	OFFICE SUPPLIES
	LGQ9048	31100	55	06-101-310	286.80	OFFICE SUPPLIES
	Check Date	8/27/2008	Check Nbr	018191	Check Total:	553.82

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03265 CENTER POINT LARGE PRINT	718272	31100	55	06-101-314	38.34	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018192	Check Total:	38.34
04195 DEMCO INC	3273578DUP	31100	55	06-101-300	24.88	DEPARTMENT SUPPLIES
	3273578	31100	55	06-101-310	63.67	OFFICE SUPPLIES
	Check Date	8/27/2008	Check Nbr	018193	Check Total:	88.55
04206 DENVER PUBLIC LIBRARY	08212008	31100	55	06-101-314	14.90	REIMBURSEMENT FOR LOST MTLS.
	Check Date	8/27/2008	Check Nbr	018194	Check Total:	14.90
06182 FINDAWAY WORLD LLC	11264	31100	55	06-101-300	14.95	DEPARTMENT SUPPLIES
	Check Date	8/27/2008	Check Nbr	018195	Check Total:	14.95
06520 FOX STAMP SIGN & SPECIALTY	158530	31100	55	06-101-300	37.25	DEPARTMENT SUPPLIES
	Check Date	8/27/2008	Check Nbr	018196	Check Total:	37.25
07044 GALE	15834914	31100	55	06-101-314	25.56	LIBRARY MATERIALS
	15857954	31100	55	06-101-314	38.93	LIBRARY MATERIALS
	15860813	31100	55	06-101-314	27.96	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018197	Check Total:	92.45
08533 RHONDA HOWE	08212008	31100	55	06-101-314	20.00	REIMBURSEMENT FOR LOST MTLS.
	Check Date	8/27/2008	Check Nbr	018198	Check Total:	20.00

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09135 INGRAM LIBRARY SERVICES	37035487	31100	55	06-101-314	82.03	LIBRARY MATERIALS
	37103884	31100	55	06-101-314	114.89	LIBRARY MATERIALS
	37103885	31100	55	06-101-314	16.65	LIBRARY MATERIALS
	37466880	31100	55	06-101-314	44.34	LIBRARY MATERIALS
	37466881	31100	55	06-101-314	65.49	LIBRARY MATERIALS
	37466882	31100	55	06-101-314	33.60	LIBRARY MATERIALS
	37543745	31100	55	06-101-314	111.38	LIBRARY MATERIALS
Check Date	8/27/2008	Check Nbr	018199	Check Total:	468.38	
10193 JAZZ CORNER SOCIETY	082608	31100	55	06-101-205	50.00	PERFORMER FEE
	Check Date	8/27/2008	Check Nbr	018200	Check Total:	50.00
11155 KITZ & PFEIL INC	0709140084	31100	55	06-101-240	21.15	REPAIR-MAINTENANCE
	0717090011	31100	55	06-101-240	4.71	REPAIR-MAINTENANCE
	0717170037	31100	55	06-101-240	16.99	REPAIR-MAINTENANCE
	0714090059	31100	55	06-101-313	9.25	HOUSEKEEPING SUPPLIES
	0715140076	31100	55	06-101-313	49.44	HOUSEKEEPING SUPPLIES
Check Date	8/27/2008	Check Nbr	018201	Check Total:	101.54	
12064 BARBARA LAFONTAINE	08212008	31100	55	06-101-316	74.15	PROGRAM SUPPLIES
	Check Date	8/27/2008	Check Nbr	018202	Check Total:	74.15
12510 MARGE LOCH-WOUTERS	08212008	31100	55	06-101-331	109.98	MILEAGE REIMBURSEMENT
	Check Date	8/27/2008	Check Nbr	018203	Check Total:	109.98
13196 MCCLOONE INSURANCE GROUP	80041	31100	55	06-101-320	20.00	NOTARY BOND APPLICATION
	Check Date	8/27/2008	Check Nbr	018204	Check Total:	20.00
13345 MENARDS-APPLETON EAST	81623	31100	55	06-101-240	299.00	REPAIR-MAINTENANCE
	Check Date	8/27/2008	Check Nbr	018205	Check Total:	299.00

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13610 MIDWEST TAPE	1661291	31100	55	06-101-314	69.27	LIBRARY MATERIALS
	1669144	31100	55	06-101-314	24.14	LIBRARY MATERIALS
	1673272	31100	55	06-101-314	36.31	LIBRARY MATERIALS
	1661290	31100	55	06-101-314	38.97	LIBRARY MATERIALS
	1665423	31100	55	06-101-314	41.97	LIBRARY MATERIALS
	1669378	31100	55	06-101-314	48.97	LIBRARY MATERIALS
	1673667	31100	55	06-101-314	128.93	LIBRARY MATERIALS
	1677794	31100	55	06-101-314	12.99	LIBRARY MATERIALS
Check Date	8/27/2008	Check Nbr	018206	Check Total:	401.55	
13710 MISTER ANDERSON'S COMPANY	0000106909	31100	55	06-101-314	32.22	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018207	Check Total:	32.22
17050 QUALITY BOOKS INC	122036	31100	55	06-101-314	15.80	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018208	Check Total:	15.80
18094 RANDOM HOUSE INC	1084996160	31100	55	06-101-314	36.00	LIBRARY MATERIALS
	1085017420	31100	55	06-101-314	20.25	LIBRARY MATERIALS
	1085018913	31100	55	06-101-314	19.20	LIBRARY MATERIALS
	1085042841	31100	55	06-101-314	120.00	LIBRARY MATERIALS
	1085047310	31100	55	06-101-314	20.21	LIBRARY MATERIALS
	1085075405	31100	55	06-101-314	93.60	LIBRARY MATERIALS
	1085075406	31100	55	06-101-314	32.00	LIBRARY MATERIALS
	1085075407	31100	55	06-101-314	16.46	LIBRARY MATERIALS
Check Date	8/27/2008	Check Nbr	018209	Check Total:	357.72	
19290 KRISTIN SEEFELDT	08212008	31100	55	06-101-331	27.38	MILEAGE REIMBURSEMENT
	Check Date	8/27/2008	Check Nbr	018210	Check Total:	27.38
19616 ST MARY CENTRAL YEARBOOK ACCT	001	31100	55	06-101-314	70.00	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018211	Check Total:	70.00

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21053 UNIQUE BOOKS INC	344451	31100	55	06-101-314	727.88	LIBRARY MATERIALS
	344452	31100	55	06-101-314	1,872.59	LIBRARY MATERIALS
	344451.2	31100	55	06-101-314	65.42	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018212	Check Total:	2,665.89
21054 UNIQUE MANAGEMENT SERVICES INC	175787	31100	46	04-171-000	358.00	COLLECTION AGENCY FEE
	Check Date	8/27/2008	Check Nbr	018213	Check Total:	358.00
23145 MELINDA WEBSTER	08212008	31100	55	06-101-314	15.95	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018214	Check Total:	15.95
23174 WEST ALLIS PUBLIC LIBRARY	43157470	31100	55	06-101-314	2.00	LOST MATERIALS PAYMENT
	Check Date	8/27/2008	Check Nbr	018215	Check Total:	2.00
23293 WINNEFOX LIBRARY SYSTEM	3140	31100	55	06-101-314	36.00	LIBRARY MATERIALS
	Check Date	8/27/2008	Check Nbr	018216	Check Total:	36.00
23445 WISCONSIN SECRETARY OF STATE	08212008	31100	55	06-101-320	20.00	NOTARY PUBLIC APPLICATION FEE
	Check Date	8/27/2008	Check Nbr	018217	Check Total:	20.00
23449 WISCONSIN STATE JOURNAL	41584	31100	55	06-101-314	221.74	SUBSCRIPTION RENEWAL
	Check Date	8/27/2008	Check Nbr	018218	Check Total:	221.74
Grand Total:					15,571.72	

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01015 A&A FIRE AND SECURITY INC	30235	31100	51	10-115-204	200.00	FIRE ALARM INSPECTION
	Check Date	8/28/2008	Check Nbr	018219	Check Total:	200.00
01075 ACCURATE SUSPENSION WAREHOUSE	8013063	31731	54	10-149-300	62.26	NON CLORINATED BRAKLEEN
	8013064	31731	54	10-149-300	113.48	SHOP SUPPLIES
	Check Date	8/28/2008	Check Nbr	018220	Check Total:	175.74
01315 AIRGAS NORTH CENTRAL	105265412	31100	55	07-202-204	29.76	ACETYLENE/ARGON/OXYGEN CYL
	105265413	31731	54	10-149-300	70.37	ACETYLENE/ARGON/OXYGEN CYL
	105285067	31731	54	10-149-300	138.35	MIG WIRE/COPPER MASONITE
	Check Date	8/28/2008	Check Nbr	018221	Check Total:	238.48
01465 ALL-SPORT TROPHY	40047	31100	55	07-201-300	152.00	TROPHIES/RIBBONS
	Check Date	8/28/2008	Check Nbr	018222	Check Total:	152.00
01620 AMERICAN PUBLIC WORKS ASSOC	60484	31100	54	10-111-320	143.00	DUES/M RADTKE
	Check Date	8/28/2008	Check Nbr	018223	Check Total:	143.00
01675 AMT		31100	21	04-299-022	150.00	
	Check Date	8/28/2008	Check Nbr	018224	Check Total:	150.00
01842 ASSOCIATED APPRAISAL	6459	31100	51	04-107-219	4,708.33	PROFESSIONAL SERVICES
	6459	31100	51	04-107-311	14.89	POSTAGE/SUPPLIES/ENV/FAX
	Check Date	8/28/2008	Check Nbr	018225	Check Total:	4,723.22
02040 BADGER HIGHWAYS CO INC	141798	31100	55	07-202-300	57.87	SCREENINGS/KOSLO PARK
	14179	31100	52	08-101-240	61.13	SCREENINGS
	Check Date	8/28/2008	Check Nbr	018226	Check Total:	119.00

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02050 BADGER LAB & ENGINEERING INC	INV000034494	31201	54	10-301-212	911.00	ALCAN PACKAGING MANHOLE SAMPLG
	Check Date	8/28/2008	Check Nbr	018227	Check Total:	911.00
02247 BAUMGART PLUMBING	082208	31100	44	04-303-000	50.00	PERMIT OVER CHARGE REFUND
	Check Date	8/28/2008	Check Nbr	018228	Check Total:	50.00
02410 BERGSTROM	focs119952	31100	52	08-101-295	190.39	REPAIR BROKEN WIRE CIRCUIT
	Check Date	8/28/2008	Check Nbr	018229	Check Total:	190.39
02605 BOELTER COMPANIES	92425854	31100	53	09-212-300	-20.40	RETURN FOAM CONTAINERS
		31100	53	09-212-300	20.40	REC'D CHECK FOR CREDIT ON ACCT
	Check Date	8/28/2008	Check Nbr	018230	Check Total:	0.00
02796 BUBRICK'S	149524	31731	54	10-149-310	6.04	CLIP DISPENSER
	149910	31100	52	08-101-310	249.16	OFFICE SUPPLIES
	150269	31731	54	10-149-310	14.06	OFFICE SUPPLIES
	Check Date	8/28/2008	Check Nbr	018231	Check Total:	269.26
03205 CASPERS TRUCK EQUIPMENT INC	33280	31731	54	10-149-315	70.00	SURGE PROTECTOR
	Check Date	8/28/2008	Check Nbr	018232	Check Total:	70.00
03247 CDW GOVERNMENT INC	LGM7160	31100	51	04-109-315	76.20	VIDEO/TV CARD/OFFENDER TRAC
	LHG9316	31100	51	10-115-310	69.89	TONER FOR CITY HALL
	LHK6591	31100	51	04-109-315	64.20	DVD RW DRIVE/USB CARD READER
	LHK6591	31100	52	08-101-310	180.38	TONER FOR PD
	Check Date	8/28/2008	Check Nbr	018234	Check Total:	390.67
03421 CHUCK'S REPAIR LLC	2844	31731	54	10-149-315	266.10	HOSES/GREASE FILLER PUMPS
	Check Date	8/28/2008	Check Nbr	018235	Check Total:	266.10

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03560 COMMON SENSE SOLUTIONS LLC	081808	31100	51	04-109-214	1,616.16	PROFESSIONAL SERVICES/IT
Check Date	8/28/2008	Check Nbr	018236	Check Total:	1,616.16	
03585 COMMUNITY HOUSING COORDINATOR	108	31100	56	03-202-216	1,600.00	COMPREHENSIVE HOUSING AUG 2008
Check Date	8/28/2008	Check Nbr	018237	Check Total:	1,600.00	
03842 CULLIGAN WATERCARE SERVICES		31100	51	10-115-201	17.85	COOLER RENTAL
		31731	54	10-149-313	5.95	COOLER RENTAL
	080108	31100	55	07-203-310	167.60	DRINKING WATER
Check Date	8/28/2008	Check Nbr	018238	Check Total:	191.40	
04135 DAVIS & KUELTHAU SC	296503	31201	54	10-301-211	1,857.12	INSURANCE MATTERS
Check Date	8/28/2008	Check Nbr	018239	Check Total:	1,857.12	
04275 DIGICORPORATION	54055	31100	13	04-113-000	-29.90	ADJUSTMENT
	54055	31100	53	09-102-291	81.90	HEALTH DEPT ENVELOPES
Check Date	8/28/2008	Check Nbr	018240	Check Total:	52.00	
04418 DUMKE & ASSOC AND	082708	31100	53	09-102-296	2,977.75	RENTAL/316 RACINE ST/SEPT 2008
Check Date	8/28/2008	Check Nbr	018242	Check Total:	2,977.75	

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05100 ELAN CARDMEMBER SERVICE	081308	31100	13	04-106-000	61.98	PUMICE SOAP/BLDGS
	081308	31100	13	04-106-000	121.62	CLORAX WIPES/BLDGS
	081308	31100	51	02-117-338	36.74	SOLEA/ELECTION TRAINING/CLERK
	081308	31100	51	04-109-315	958.05	VIDEO.COM/CAMERA/POLICE
	081308	31100	51	04-109-339	92.33	AMAZON.COM/NETWORKING/IT
	081308	31100	51	10-115-310	148.92	TONER/CITY HALL
	081308	31100	51	10-115-315	4.99	PHONE HOLSTER/BDLG SERVICES
	081308	31100	52	08-101-240	64.29	ARCH BLDRS/PIVOT/PD
	081308	31100	52	08-101-300	77.90	DIGITAL CARD/PD
	081308	31100	52	08-101-300	35.00	MEMBERSHIP POLICE WORK DAY
	081308	31100	52	08-101-300	-1.99	RETURN CREDIT
	081308	31100	52	08-101-310	74.79	TONER/POLICE
	081308	31100	52	08-101-333	546.63	HYATT/CONFERENCE/PD
	081308	31100	52	08-101-333	109.89	KALAHARI/CONFERENCE/PD
	081308	31100	52	08-101-333	70.00	CHULA VISTA/CONFERENCE/PD
	081308	31100	52	08-101-334	80.00	PARKING PBINAA CONFERENCE/PD
	081308	31100	52	08-101-338	9.00	MEALS/CONFERENCE/PD
	081308	31100	53	09-102-310	43.19	TONER/HEALTH
	081308	31100	53	09-212-300	13.00	ACOUSTIC BACK/SR CENTER
	081308	31100	53	09-212-300	29.93	ACOUSTIC BACK/SR CENTER
	081308	31100	53	09-212-300	-6.50	ACOUSTIC BACK RETURN
	081308	31100	53	09-212-337	50.00	UW OSHKOSH/HEALTH
	081308	31100	54	10-111-320	83.00	DRL LICENSE RENEWAL/DPW
	081308	31731	54	10-149-300	88.99	PRO-COMP LIQ/AUTO ZONE/DPW
	081308	31731	54	10-149-315	27.30	TEMP GAUGE/AUTZONE/DPW
	081308	31731	54	10-149-315	9.98	PHONE HOLSTER/PWF
	081308	31731	54	10-149-315	41.94	PHONE HOLSTERS/PWF
	081308	31731	54	10-149-383	124.99	FLEET FARM/SHAFT/DPW
	081308	31100	55	06-101-313	-75.00	RETURN/LIB
	081308	31100	55	06-101-315	149.00	E-FILLIATE/LIBRARY
	081308	31100	55	06-101-315	13.07	E-FILLIATE/LIBRARY
	081308	31100	55	06-101-316	321.79	SCHOLASTIC BOOK FAIR/LIB
	081308	31100	55	07-201-300	164.24	PICK N SAVE/PARK

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	081308	31100	55	07-201-300	56.85	MENASHA EXPRESS/PARK
	081308	31100	55	07-201-338	130.28	PERKINS/PARK
	081308	31100	55	07-202-240	88.14	KIOSK BOARDS
	081308	31100	55	07-202-243	109.52	WELD SPECIALTY/PARK
	081308	31100	55	07-202-243	592.00	DRAMM CORP/PARK
	081308	31100	55	10-215-221	23.93	PHONES/BRIDGES
Check Date	8/28/2008	Check Nbr	018243		Check Total:	4,569.78
06040 FAHRNER ASPHALT SEALERS INC	M0003-980136B	31100	54	10-121-212	30,724.84	2008 CHIP SEAL PROJECT
Check Date	8/28/2008	Check Nbr	018244		Check Total:	30,724.84
06115 FERRELLGAS	1023149120	31266	54	10-307-216	64.18	LIQUEFIED PETROLEUM GAS
Check Date	8/28/2008	Check Nbr	018245		Check Total:	64.18
06680 FRONTLINE UNIFORM	2545	31100	52	08-109-300	201.60	BATONS
Check Date	8/28/2008	Check Nbr	018246		Check Total:	201.60
07045 DEBBIE GALEAZZI	082708	31100	51	02-117-243	37.90	BATTERIES FOR ELECTION MACHINE
	082708	31100	51	02-104-331	38.61	MILEAGE/CLERK CONFERENCE/POINT
Check Date	8/28/2008	Check Nbr	018247		Check Total:	76.51
07080 GANNETT WISCONSIN NEWSPAPERS	0003507432	31100	51	02-105-293	171.36	LEGALS
	0003507432	31100	51	04-101-292	729.97	LEGALS
	0003507432	31100	55	04-221-292	75.68	LEGALS
	0003507432	31100	55	07-201-293	441.00	LEGALS
Check Date	8/28/2008	Check Nbr	018248		Check Total:	1,418.01

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07580 GUNDERSON UNIFORM & LINEN RENT	1266210	31100	51	10-115-201	15.26	MOP/MAT SERVICE
	1266210	31100	53	09-212-313	3.46	MOP/MAT SERVICE
	1266210	31100	55	06-101-313	3.46	MOP/MAT SERVICE
	1268232	31100	51	10-115-201	15.26	MOP/MOP SERVICE
	1268232	31100	53	09-212-313	3.46	MOP/MAT SERVICE
	1268232	31100	55	06-101-313	3.46	MOP/MAT SERVICE
Check Date	8/28/2008	Check Nbr	018249	Check Total:	44.36	
08190 HAWKINS INC	1218423RI	31100	55	07-203-300	39.72	POOL CHEMICALS
	Check Date	8/28/2008	Check Nbr	018250	Check Total:	39.72
08495 HORN PRECAST	2394	31100	54	10-134-300	948.00	RISERS
	Check Date	8/28/2008	Check Nbr	018251	Check Total:	948.00
10230 JOHN'S SAW SERVICE	8228	31731	54	10-149-383	61.93	FILTER KITS
	Check Date	8/28/2008	Check Nbr	018252	Check Total:	61.93
11098 SAM KERN	062308	31100	55	07-203-300	22.26	LESSON SUPPLIES
	Check Date	8/28/2008	Check Nbr	018253	Check Total:	22.26
11235 KONE INC	150027934	31100	51	10-115-204	218.07	MAINTENANCE AGREEMENT
	Check Date	8/28/2008	Check Nbr	018254	Check Total:	218.07
11365 KUNDINGER FLUID POWER INC	50025349	31731	54	10-149-383	497.64	HOSES/COUPLINGS
	Check Date	8/28/2008	Check Nbr	018255	Check Total:	497.64

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12092 LAKE PARK VILLAS HOMEOWNERS	073108	31100	54	10-143-223	30.59	UTILITIES
	073108	31100	55	07-202-216	2,516.52	POND
	073108	31100	55	07-202-223	1,101.63	UTILITIES
	073108	31100	56	03-501-513	454.72	INSURANCE
Check Date	8/28/2008	Check Nbr	018256	Check Total:	4,103.46	
12110 LAMERS BUS LINES INC	37382	31100	55	07-201-205	83.95	BUS TRIP/TIMBER RATTlers
	Check Date	8/28/2008	Check Nbr	018257	Check Total:	83.95
12135 LANDMARK STAFFING RESOURCES	674577	31100	51	04-109-801	408.00	DATA ENTRY/FLEET MGMT PROJECT
	Check Date	8/28/2008	Check Nbr	018258	Check Total:	408.00
12375 LEVENHAGEN CORPORATION	65219	31207	55	07-205-381	5,382.34	LEAD FREE GAS
	65259	31207	55	07-205-381	5,736.99	LEAD FREE GAS
	Check Date	8/28/2008	Check Nbr	018259	Check Total:	11,119.33
13149 MATTHEWS COMMERCIAL TIRE CTR	026435	31731	54	10-149-382	266.80	SQUAD TIRE STOCK
	026406	31731	54	10-149-382	29.13	REPAIR TRUCK FLAT
	026501	31731	54	10-149-382	220.30	TIRE SERVICE
	026489	31731	54	10-149-382	51.35	TIRE SERVICE
	Check Date	8/28/2008	Check Nbr	018260	Check Total:	567.58
13151 MATTHEWS TIRE & AUTO SERVICE	186970	31731	54	10-149-382	183.32	TIRE REPAIR
	Check Date	8/28/2008	Check Nbr	018261	Check Total:	183.32

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13360 MENASHA ELECTRIC & WATER UTILI	003068	31201	54	10-302-250	16,300.41	SEWER CHARGE JUNE 2008
	073008	31100	12	04-399-000	14.61	TRAFFIC LIGHTS
	073008	31100	51	04-109-214	763.00	FIBER CONNECTION
	073008	31100	51	10-115-223	1,760.36	CITY BUILDINGS
	073008	31100	51	10-115-225	289.01	CITY BUILDINGS
	073008	31100	53	09-212-223	340.94	SENIOR CENTER
	073008	31100	53	09-212-225	77.24	SENIOR CENTER
	073008	31100	54	10-131-223	307.86	TRAFFIC LIGHTS
	073008	31201	54	10-301-223	40.10	LIFT STATION
	073008	31100	55	04-221-223	10.50	CURTIS REED PLAZA
	073008	31100	55	07-202-223	1,598.21	PARKS
	073008	31100	55	07-202-225	978.71	PARKS
	073008	31207	55	07-205-223	1,655.83	MARINA
	073008	31207	55	07-205-225	26.54	MARINA
	073008	31100	55	10-215-223	193.28	LIFT BRIDGES
	073008	31100	55	10-215-225	42.51	LIFT BRIDGES
	080808	31100	54	10-143-223	14,155.48	PUBLIC STREET LIGHTING
Check Date 8/28/2008 Check Nbr 018262 Check Total:					38,554.59	
13370 MENASHA EMPLOYEES CREDIT UNION		31100	21	04-299-020	1,857.00	
		31100	21	04-299-020	16,531.00	
Check Date 8/28/2008 Check Nbr 018263 Check Total:					18,388.00	
13375 MENASHA EMPLOYEES LOCAL 1035		31100	21	04-299-031	300.00	
Check Date 8/28/2008 Check Nbr 018264 Check Total:					300.00	
13377 MENASHA EMPLOYEES LOCAL 1035B		31100	21	04-299-032	248.16	
Check Date 8/28/2008 Check Nbr 018265 Check Total:					248.16	
13430 TOWN OF MENASHA POLICE DEPT	082208	31100	21	04-229-000	112.00	BOND
Check Date 8/28/2008 Check Nbr 018266 Check Total:					112.00	

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13494 DONALD MERKES	082508	31100	51	01-102-331	241.60	MILEAGE
	082508	31100	51	01-102-334	7.70	PARKING
	Check Date	8/28/2008	Check Nbr	018267	Check Total:	249.30
13550 MICHELS MATERIALS	200957	31485	56	03-202-822	2,477.86	DENSE BASE/NATURES WAY
	Check Date	8/28/2008	Check Nbr	018268	Check Total:	2,477.86
13625 MILLER & ASSOCIATES	19226	31100	55	07-202-805	826.77	SWING/SEATS
	Check Date	8/28/2008	Check Nbr	018269	Check Total:	826.77
13723 MODERN DAIRY INC	163072	31100	55	07-203-317	536.09	POOL CONCESSIONS
	Check Date	8/28/2008	Check Nbr	018270	Check Total:	536.09
13755 MORTON SAFETY	316066	31731	54	10-149-300	115.78	EAR PLUGS/EYEWEAR
	316067	31100	55	07-202-315	42.80	SAFETY MASK
	Check Date	8/28/2008	Check Nbr	018271	Check Total:	158.58
13787 MOTOR & CONTROL SERVICE INC	10475	31100	55	07-203-240	98.50	BOILER PUMP REPAIR
	Check Date	8/28/2008	Check Nbr	018272	Check Total:	98.50
14010 N&M AUTO SUPPLY	225669	31731	54	10-149-383	22.28	ADAPTER/BACKET
	Check Date	8/28/2008	Check Nbr	018273	Check Total:	22.28
14205 CITY OF NEENAH TREASURER	082808	31100	52	05-201-250	234,310.00	N/M FIRE RESUCE/SEPT 2008
	Check Date	8/28/2008	Check Nbr	018274	Check Total:	234,310.00

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14215 NEENAH-MENASHA MUNICIPAL COURT	082208	31100	21	04-229-000	182.00	BOND
	082208	31100	21	04-229-000	260.00	BOND
	082208	31100	21	04-229-000	134.00	BOND
	082208	31100	21	04-229-000	197.00	BOND
	082208	31100	21	04-229-000	134.00	BOND
	082208	31100	21	04-229-000	134.00	BOND
	082208	31100	21	04-229-000	323.00	BOND
	082208	31100	21	04-229-000	163.00	BOND
Check Date	8/28/2008	Check Nbr	018275	Check Total:	1,527.00	
14270 NETWORK HEALTH PLAN	00376462	31100	21	04-619-003	113,065.32	EMPLOYEES
	00376462	31100	21	04-650-000	10,014.74	RETIREEES/COBRA
Check Date	8/28/2008	Check Nbr	018276	Check Total:	123,080.06	
14430 NORTH RIDGE CONSTRUCTION &	082608	31263	56	03-207-701	534.62	CDBG REHAB/947 MISTFLOWER
	Check Date	8/28/2008	Check Nbr	018278	Check Total:	534.62
	082608	31263	56	03-207-701	519.44	CDBG REHAB/956 BERGAMONT
	Check Date	8/28/2008	Check Nbr	018279	Check Total:	519.44
	082608	31263	56	03-207-701	1,729.75	CDBG REHAB/935 BERGAMONT
	Check Date	8/28/2008	Check Nbr	018280	Check Total:	1,729.75
	082608	31263	56	03-207-701	2,167.30	CDBG REHAB/932 BERGAMONT
	Check Date	8/28/2008	Check Nbr	018281	Check Total:	2,167.30
14420 NORTHEAST WISCONSIN	082708	31100	53	09-113-337	25.00	REGISTRATION/IMMUN COALITION
	Check Date	8/28/2008	Check Nbr	018277	Check Total:	25.00
15048 OFFICE DEPOT	402376824	31731	54	10-149-310	26.63	OFFICE SUPPLIES
	402376823	31100	51	10-115-310	11.52	COPY PAPER/2ND FLOOR
Check Date	8/28/2008	Check Nbr	018282	Check Total:	38.15	

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15080 OFFICEMAX INC	001078	31100	51	10-115-310	25.98	2ND FLOOR PAPER
	001078	31100	54	10-111-310	38.96	OFFICE SUPPLIES
	150124	31100	51	01-102-310	2.31	OFFICE SUPPLIES/MAYOR
	150124	31100	51	02-104-310	9.69	OFFICE SUPPLIES/CLERK
	150124	31100	51	02-105-310	23.58	OFFICE SUPPLIES/PERSONNEL
	150124	31100	51	04-101-310	42.06	OFFICE SUPPLIES/CC
Check Date	8/28/2008	Check Nbr	018283		Check Total:	142.58
15130 NICHOLAS OLESZAK	081208	31100	52	08-101-295	48.65	MILEAGE
	Check Date	8/28/2008	Check Nbr	018284	Check Total:	48.65
15210 ORIENTAL TRADING CO INC	626188923-01	31100	55	07-201-300	77.76	GRUNSKI SUPPLIES
	Check Date	8/28/2008	Check Nbr	018285	Check Total:	77.76
15280 OUTAGAMIE COUNTY CLERK OF COUR	082208	31100	21	04-229-000	100.00	BOND
	082208	31100	21	04-229-000	200.00	BOND
	Check Date	8/28/2008	Check Nbr	018286	Check Total:	300.00
16025 PACKER CITY INTERNATIONAL	3282130028	31731	54	10-149-383	393.80	TUFF
	3282120067	31731	54	10-149-383	109.74	AIR FILTER STOCK
	3282140032	31731	54	10-149-300	97.20	FEATURE FLUID
	3282120027	31731	54	10-149-383	114.86	AIR FILTERS/HYDRAULI
	Check Date	8/28/2008	Check Nbr	018287	Check Total:	715.60
16095 PARTS ASSOCIATES INC	pai0776437	31731	54	10-149-300	35.66	TAPES/LOCK NUTS
	Check Date	8/28/2008	Check Nbr	018288	Check Total:	35.66
16190 PEPSI AMERICAS	8220221823	31100	55	07-203-317	263.00	POOL CONCESSIONS
	8220221824	31100	55	07-203-317	237.50	POOL CONCESSIONS
	Check Date	8/28/2008	Check Nbr	018289	Check Total:	500.50

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16372 PLANETARY PRODUCTIONS LTD	080108	31100	55	07-201-205	250.00	CARNIVAL ENTERTAINER
Check Date	8/28/2008	Check Nbr	018290	Check Total:	250.00	
17070 QUALITY PRINTING CO INC	A20766	31100	55	07-202-291	1,460.00	DAILY LAUNCH ENVELOPES
Check Date	8/28/2008	Check Nbr	018291	Check Total:	1,460.00	
18020 LEON RABE	071508	31827	53	09-212-205	75.00	ENTERTAINMENT SEPT PARTY
Check Date	8/28/2008	Check Nbr	018292	Check Total:	75.00	
18160 REDI-WELDING CO	13743	31731	54	10-149-300	75.60	ANGLE
Check Date	8/28/2008	Check Nbr	018293	Check Total:	75.60	
18400 ROAD EQUIPMENT	487952	31731	54	10-149-383	38.28	JUNCTION BOX/CONNECTOR
Check Date	8/28/2008	Check Nbr	018294	Check Total:	38.28	
04350 ROUTE 41 PIZZA LLC	0009588-IN	31100	55	07-203-338	85.82	SWIMMING LESSONS
Check Date	8/28/2008	Check Nbr	018241	Check Total:	85.82	
19136 SCHAEFFER MFG CO	316296	31731	54	10-149-300	405.80	MOLY ULTRA RED SUPREME
Check Date	8/28/2008	Check Nbr	018295	Check Total:	405.80	
19150 SCHENCK BUSINESS SOLUTIONS	287802	31100	51	04-106-212	1,900.00	2007 AUDIT FINAL BILLING
Check Date	8/28/2008	Check Nbr	018296	Check Total:	1,900.00	
19232 LAUREN ELIZABETH SCHULTZ	082008	31822	55	04-107-316	250.00	HATTIE MINER SCHOLARSHIP
Check Date	8/28/2008	Check Nbr	018297	Check Total:	250.00	
19325 SERVICE MOTOR COMPANY	IV66002	31731	54	10-149-383	342.82	SCRAPER KIT/FILTER
Check Date	8/28/2008	Check Nbr	018298	Check Total:	342.82	

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19370 DR TERESA SHOBERG	082708	31100	53	09-102-215	150.00	CITY PHYSICIAN/SEPT 2008
	Check Date	8/28/2008	Check Nbr	018299	Check Total:	150.00
19410 SKID & PALLET	17251	31100	54	10-121-300	106.25	MULCH
	022550	31100	55	07-202-300	233.75	LANDSCAPE MULCH
	17739	31100	54	10-121-300	34.00	4 YRDS NATURAL MULCH/RIVER ST
	022550	31100	55	07-202-300	-233.75	VOID CHECK 18107
	17739	31100	54	10-121-300	-34.00	VOID CHECK 18107
	17251	31100	54	10-121-300	-106.25	VOID CHECK 17933
	Check Date	8/28/2008	Check Nbr	018300	Check Total:	0.00
19585 SPORTS GRAPHICS	1079B	31100	55	07-201-300	1,716.45	GRUNSKI RUNSKI T SHIRTS
	803B	31100	55	07-201-300	77.00	STAFF SHIRTS
	810B	31826	55	07-202-300	622.75	YOUTH BASEBALL SHIRTS
	821B	31100	55	07-203-310	25.00	POOL STAFF SHIRTS
	968B	31100	55	07-203-310	88.00	POOL SWEATSHIRTS
	614B	31100	55	07-203-310	191.84	MANAGER SHIRTS
	810B	31826	55	07-202-300	-622.75	INV PAID TWICE
	Check Date	8/28/2008	Check Nbr	018301	Check Total:	2,098.29
19735 STUMPF CREATIVE LANDSCAPES	080108	31100	52	08-101-240	50.00	BRICK EDGES
	Check Date	8/28/2008	Check Nbr	018302	Check Total:	50.00
20405 TRI-COUNTY OVERHEAD DOOR INC	21211	31731	54	10-149-240	175.00	REPAIR DOOR CABLES
	Check Date	8/28/2008	Check Nbr	018303	Check Total:	175.00
21045 UNIFIRST CORPORATION	0970036056	31731	54	10-149-201	82.31	MAT/MOP/CLOTHING SERVICE
	Check Date	8/28/2008	Check Nbr	018304	Check Total:	82.31

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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
21060 UNITED PAPER CORPORATION	62762	31100	55	07-203-242	435.25	CHARGER
Check Date	8/28/2008	Check Nbr	018305	Check Total:	435.25	
21095 UNITED WAY FOX CITIES		31100	21	04-299-021	85.75	
Check Date	8/28/2008	Check Nbr	018306	Check Total:	85.75	
21227 US OIL CO INC	L34691	31731	54	10-149-242	24.00	SAMPLES
Check Date	8/28/2008	Check Nbr	018307	Check Total:	24.00	
21305 UTILITY SALES AND SERVICE	0117906-IN	31731	54	10-149-383	110.89	CAP BOOT
Check Date	8/28/2008	Check Nbr	018308	Check Total:	110.89	
22025 VALLEY CHEMICAL LLC	0020057-IN	31100	55	07-203-300	32.95	CHEMICALS TO TEST POOL WATER
	0020028-IN	31100	55	07-203-300	163.20	CHEMICALS TO TEST POOL WATER
Check Date	8/28/2008	Check Nbr	018309	Check Total:	196.15	
22120 VALLEY POPCORN CO INC	82605	31100	55	07-203-317	155.75	POOL CONCESSIONS
Check Date	8/28/2008	Check Nbr	018310	Check Total:	155.75	
03225 WC INDUSTRIAL SUPPLY COMPANY	0001818-IN	31731	54	10-149-383	19.94	BELT
	0001825-IN	31731	54	10-149-383	123.15	MAST GUIDE BEARING
Check Date	8/28/2008	Check Nbr	018233	Check Total:	143.09	

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23152 WE ENERGIES	080108	31100	12	04-399-000	57.98	N-M FIRE RESCUE
	080108	31100	51	10-115-224	50.85	CITY HALL
	080108	31100	52	08-101-224	80.07	POLICE
	080108	31100	53	09-212-224	8.12	SENIOR CENTER
	080108	31731	54	10-149-224	52.06	GARAGE
	080108	31100	55	06-101-224	45.83	LIBRARY
	080108	31100	55	07-202-224	70.88	PARKS
	080108	31100	55	07-203-224	11,042.87	POOL
	080108	31207	55	07-205-224	45.53	MARINA
Check Date 8/28/2008 Check Nbr 018311 Check Total:					11,454.19	
23165 WEST PAYMENT CENTER	816472247	31100	51	02-103-322	100.27	INFORMATION CHARGES
	Check Date 8/28/2008 Check Nbr 018312 Check Total:					100.27
23250 WINNEBAGO COUNTY CLERK OF COUR	082208	31100	21	04-229-000	335.00	BOND
	082208	31100	21	04-229-000	150.00	BOND
	Check Date 8/28/2008 Check Nbr 018313 Check Total:					485.00
23275 WINNEBAGO COUNTY TREASURER	AUGUST	31310	57	04-201-620	42,250.00	WINN DO IND DEV PROJ/INTEREST
	Check Date 8/28/2008 Check Nbr 018314 Check Total:					42,250.00
23385 WISCONSIN DEPARTMENT OF REGULA	082808	31100	52	08-101-216	25.00	SPECIAL USE PERMIT/PD
	Check Date 8/28/2008 Check Nbr 018315 Check Total:					25.00
23455 WISCONSIN SUPPORT COLLECTIONS		31100	21	04-299-015	536.31	
		31100	21	04-299-016	138.40	
		31100	21	04-299-015	711.92	
	Check Date 8/28/2008 Check Nbr 018316 Check Total:					1,386.63

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23590 WWPHEC	072508	31100	53	09-102-337	16.00	REGISTRATION/V DAVIS
	072508	31100	53	09-102-337	-16.00	REGISTRATION CANCELLED
Check Date	8/28/2008	Check Nbr	018317	Check Total:	0.00	
Grand Total:					563,710.92	